IOWA DEPARTMENT OF HUMAN SERVICES

PAGE 1 AS OF 04/30/11 MEDICAID MANAGEMENT INFORMATION SYSTEM RUN DATE 04/23/11

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TITLE XIX REPORT OF EXPENDITURES (BY CATEGORY OF SERVICE)

(MONTHLY TOTALS AS OF 04/30/11)

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|-------------------------------|------------|---------|-----------|------------------------|------------|------------|---------|--------------------|
| CATEGORY OF SERVICE | RECIPIENTS | | UNITS OF | TOTAL | UNIT OF | ELIGIBLE R | | |
| | SERVED | CLAIMS | SERVICE | PAYMENT | SERVICE | RECIPIENT | SERVED | SERVED |
| INPATIENT | 6,359 | 6,639 | 37,628 | \$32,929,280.04 | \$875.13 | \$69.76 | 5.9 | \$5,178.37 |
| OUTPATIENT | 67,993 | 97,971 | 1,289,099 | \$20,282,612.54 | \$15.73 | \$42.97 | 19.0 | \$298.30 |
| CHILD PART HOSP | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| CHILD DAY TREATMENT | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| ADULT PART HOSP | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| ADULT DAY TREATMENT | 1 | 1 | 8 | \$264.08 | \$33.01 | \$0.00 | 8.0 | \$264.08 |
| SKILLED NURSING FACILITY | 797 | 959 | 13,323 | \$2,350,801.11 | \$176.45 | \$4.98 | 16.7 | \$2,949.56 |
| INTERMEDIATE CARE FACILITY | 11,368 | 12,672 | 365,843 | \$43,659,367.17 | \$119.34 | \$92.49 | 32.2 | \$3,840.55 |
| INTER CARE MENTAL RETARDA | 1,735 | 1,775 | 52,627 | \$17,541,576.86 | \$333.32 | \$37.16 | 30.3 | \$10,110.42 |
| NURSING FAC FOR MENTAL ILL | 21 | 21 | 637 | \$129,250.55 | \$202.91 | \$0.55 | 30.3 | \$6,154.79 |
| HOME HEALTH | 12,509 | 14,844 | 244,167 | \$8,963,399.78 | \$36.71 | \$18.99 | 19.5 | \$716.56 |
| LEAD INSPECTION AGENCY | 1 | 1 | 1 | \$362.06 | \$362.06 | \$0.00 | 1.0 | \$362.06 |
| PHYSICIAN | 130,363 | 276,495 | 384,493 | \$17,493,556.34 | \$45.50 | \$37.06 | 2.9 | \$134.19 |
| CLINIC SERVICES | 24,313 | 34,572 | 32,965 | \$5,239,661.21 | \$158.95 | \$11.10 | 1.4 | \$215.51 |
| MEP CASE MANAGEMENT | 0 | 0 1,012 | 02,500 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| EHR INCENTIVE PAYMENTS | 1 | 0 | 0 | \$343,039.00 | \$0.00 | \$0.73 | .0 | \$343,039.00 |
| LAB AND RADIOLOGICAL | 14,076 | 20,368 | 32,340 | \$575,310.14 | \$17.79 | \$1.22 | 2.3 | \$40.87 |
| HABILITATION SERVICES | 3,528 | 8,615 | 120,209 | \$5,529,728.38 | \$46.00 | \$11.71 | 34.1 | \$1,567.38 |
| REMEDIAL SERVICES | 10,153 | 23,574 | 350,537 | \$5,349,998.97 | \$15.26 | \$11.33 | 34.5 | \$526.94 |
| REHAB SUPPORT SERVICES | 10,155 | 23,374 | 0 0 | | \$0.00 | \$0.00 | | \$0.00 |
| AMBULANCE SERVICES | | | | \$0.00 \$434,910.65 | | | .0 | \$0.00 \$140.29 |
| | 3,100 | 3,530 | 3,510 | - | \$123.91 | \$0.92 | 1.1 | |
| LOCAL EDUCATION AGENCY | 1,668 | 3,838 | 479,744 | \$5,000,752.05 | \$10.42 | \$10.59 | 287.6 | \$2,998.05 |
| EARLY ACCESS SERVICES | 517 | 925 | 1,549 | \$19,481.50 | \$12.58 | \$0.04 | 3.0 | \$37.68 |
| PRESCRIBED DRUGS | 136,315 | 401,093 | 357,998 | \$21,159,966.27 | \$59.11 | \$44.82 | 2.6 | \$155.23 |
| DRUG CAPITATION | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| NEMT SERVICES | 372,237 | 389,610 | 389,492 | \$833,512.88 | \$2.14 | \$1.77 | 1.0 | \$2.24 |
| INDIAN HEALTH SERVICES | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| FAMILY PLANNING SERVICES | 7,247 | 8,216 | 8,252 | \$788,997.45 | \$95.61 | \$1.67 | 1.1 | \$108.87 |
| IOWA CARE MED HOME CAPITATION | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| IOWA PLAN PROGRAM | 371,405 | 404,475 | 404,339 | \$11,490,272.35 | \$28.42 | \$24.34 | 1.1 | \$30.94 |
| MANAGED SUBSTANCE ABUSE | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| MENTAL HEALTH ACCESS PLAN | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| EPSDT SCREENING | 7,434 | 8,085 | 8,061 | \$1,116,151.75 | \$138.46 | \$4.25 | 1.1 | \$150.14 |
| HMO SERVICES | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| PACE SERVICES | 95 | 124 | 124 | \$360,291.00 | \$2,905.57 | \$0.76 | 1.3 | \$3,792.54 |
| PATIENT MANAGEMENT | 175,664 | 176,504 | 176,503 | \$353,006.00 | \$2.00 | \$35.57 | 1.0 | \$2.01 |
| HEALTH INS PREMIUM PAYMENT | 3,264 | 7,419 | 7,419 | \$485,553.48 | \$65.45 | \$1.03 | 2.3 | \$148.76 |
| MEDICAL SUPPLIES | 25,957 | | 1,767,093 | \$3,982,039.33 | \$2.25 | \$8.44 | 68.1 | \$153.41 |
| OTHER PRACTITIONER | 18,962 | 29,333 | 72,654 | \$3,976,776.84 | \$54.74 | \$8.42 | 3.8 | \$209.72 |
| FAMILY CENTERED PROGRAM | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| FAMILY PRESERVATION | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| TREATMENT FOSTER FAMILY CARE | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| GROUP TREATMENT THERAPY | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| DENTAL | 29,279 | 35,779 | 36,040 | \$5,300,404.95 | \$147.07 | \$11.23 | 1.2 | \$181.03 |
| OPTOMETRIST | 12,810 | 15,306 | 16,100 | \$924,614.93 | \$57.43 | \$1.96 | 1.3 | \$72.18 |
| CHIROPRACTIC | 9,716 | 17,418 | 20,854 | \$526,475.58 | \$25.25 | \$1.12 | 2.1 | \$54.19 |
| PODIATRIC | 4,370 | 5,412 | 7,196 | \$230,538.19 | \$32.04 | \$0.49 | 1.6 | \$52.75 |
| PHYSICAL DISABILITIES SVCS | 723 | 995 | 28,230 | \$350,492.28 | \$12.42 | \$0.74 | 39.0 | \$484.77 |
| BRAIN INJ WAIVER SERVICES | 1,080 | 2,491 | 56,965 | \$1,863,582.72 | \$32.71 | \$3.95 | 52.7 | \$1,725.54 |
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IAMM2200-R002 (MR-0-12) AS OF 04/30/11

IOWA DEPARTMENT OF HUMAN SERVICES MEDICAID MANAGEMENT INFORMATION SYSTEM

PAGE 2 RUN DATE 04/23/11

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TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)

(MONTHLY TOTALS AS OF 04/30/11)

| CATEGORY OF SERVICE | RECIPIENTS SERVED | NUMBER OF CLAIMS | UNITS OF SERVICE | TOTAL PAYMENT | COST PER UNIT OF SERVICE | ELIGIBLE RE | ITS PER ECIPIENT SERVED | COST PER RECIPIENT SERVED |
|-------------------------------|----------------------|---------------------|---------------------|------------------|--------------------------------|-------------|-------------------------------|---------------------------------|
| PSYCHIATRIC | 3,970 | 6,430 | 7,199 | \$263,074.60 | \$36.54 | \$0.56 | 1.8 | \$66.27 |
| RESIDENTIAL CARE FACILITY | 1,419 | 1,492 | 43,820 | \$353,921.01 | \$8.08 | \$0.75 | 30.9 | \$249.42 |
| ID WAIVER SERVICE | 10,313 | 19,518 | 664,429 | \$28,708,598.54 | \$43.21 | \$2,631.64 | 64.4 | \$2,783.73 |
| CHILDRENS MENTAL HEALTH SVC | 611 | 872 | 34,499 | \$551,947.24 | \$16.00 | \$735.93 | 56.5 | \$903.35 |
| AIDS WAIVER SERVICES | 37 | 67 | 3,016 | \$36,369.05 | \$12.06 | \$887.05 | 81.5 | \$982.95 |
| ELDERLY WAIVER SERVICES | 9,076 | 26,110 | 449,196 | \$6,075,363.82 | \$13.52 | \$659.36 | 49.5 | \$669.39 |
| ILL & HANDICAPPED WAIVER SVCS | 2,027 | 3,207 | 100,373 | \$1,688,136.43 | \$16.82 | \$677.69 | 49.5 | \$832.83 |
| COUNTY OFFICE REIMBURSEMENT | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| MEP SERVICES | 10,367 | 12,030 | 109,336 | \$3,530,446.24 | \$32.29 | \$7.48 | 10.5 | \$340.55 |
| UNASSIGNED | 18 | 0 | 0 | \$278,110.83 | \$0.00 | \$0.59 | .0 | \$15,450.60 |
| * ALL CATEGORIES * | 409,691 2 | 2,121,305 | 8,177,868 | \$261,071,996.19 | \$31.92 | \$553.04 | 20.0 | \$637.24 |
| | | | *** END OF | REPORT *** | | | | |